

**Approval Form - Attachment B(1)**

1

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<b>Baseline Change Proposal (BCP) Approval Form</b>						<b>HQ BCP No.</b>																						
1. <b>PBS Field Code:</b>		2. <b>PBS Title:</b> (For New PBSs this is the Proposed Title)						3. <b>Date BCP Initiated:</b>																				
4. <b>Operations Office:</b>		5. <b>BCP Title:</b> (Short Descriptive Title that Represents the BCP)																										
6. <b>Field BCP No.:</b>		7. <b>BCP Type:</b>		Technical		Cost		PBS Structure		8. <b>BCP Approval Authority:</b>																		
		Schedule		Other						DAS		EM-1		S-1														
9. <b>Field Points of Contact:</b> (Names & Phone No.s)								10. <b>HQ Points of Contact:</b> (Names & Phone No.s)																				
11. <b>BCP Change Description:</b>																												
12. <b>Originator:</b>																												
<b>13. Site Team:</b> <table style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 15%;"></th> <th style="width: 45%;">Name</th> <th style="width: 40%;">Initial</th> </tr> <tr> <td>Reviewer 1</td> <td>( )</td> <td>_____</td> </tr> <tr> <td>Reviewer 2</td> <td>( )</td> <td>_____</td> </tr> <tr> <td>Reviewer 3</td> <td>( )</td> <td>_____</td> </tr> <tr> <td>Reviewer 4</td> <td>( )</td> <td>_____</td> </tr> </table> <div style="display: flex; justify-content: space-between;"> <div>_____/_____/_____ Date</div> <div>_____ Site Lead</div> </div>									Name	Initial	Reviewer 1	( )	_____	Reviewer 2	( )	_____	Reviewer 3	( )	_____	Reviewer 4	( )	_____	<b>14. Lead Site DAS Action:</b> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Recommended (Endorsed)  <input type="checkbox"/> Not Recommended  <input type="checkbox"/> Conditionally - Recommended </div> <div> <input type="checkbox"/> Approved  <input type="checkbox"/> Disapproved  <input type="checkbox"/> Conditionally - Approved </div> </div> <div style="display: flex; justify-content: space-between;"> <div>_____/_____/_____ Date</div> <div>_____ Lead Site Deputy Assistant Secretary</div> </div>					
	Name	Initial																										
Reviewer 1	( )	_____																										
Reviewer 2	( )	_____																										
Reviewer 3	( )	_____																										
Reviewer 4	( )	_____																										
Recommendation / Comment:								Conditionally Recommended / Conditionally Approved:																				
<b>15. EM Change Control Board:</b> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Recommended  <input type="checkbox"/> Not Recommended  <input type="checkbox"/> Conditionally Recommended </div> <div> <input type="checkbox"/> Approved  <input type="checkbox"/> Disapproved  <input type="checkbox"/> Conditionally Approved </div> </div> <div style="display: flex; justify-content: space-between;"> <div>_____/_____/_____ Date</div> <div>_____ EM-1 Assistant Secretary or Chairperson</div> </div>																												
Conditionally Recommended / Conditionally Approved / Comment:																												

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<u>Block Number</u>	<u>Instructions</u>
	<b><i>This form is designed for changes to a single PBS. If changes involve more than one PBS (consolidation or split out of PBSs, significant transfer of sub-projects to and from PBSs, etc.), additional crosswalk data is required to maintain EM's corporate database. Attach crosswalk data(1) as separate documents to this form.</i></b>
Pg 1 of 1	For identification purposes - the HQ Change Control Secretariat will enter the unique HQ BCP Number at the top right corner of the page.
1.	Enter the Project Baseline Summary (PBS) Field Code.
2.	Enter the current PBS title or for a new PBS enter the proposed title.
3.	Enter the date the BCP was initiated (i.e., approved by Field Manager and sent to Headquarters.)
4.	Enter the Operations Office Name.
5.	Enter a short descriptive title that represents the BCP.
6.	Enter the unique Field BCP Number that was assigned when the BCP was initiated at the Field Site.
7.	Check the baseline component(s) (technical scope, schedule, cost, PBS structure, or other) that have exceeded threshold values.
8.	Mark approval authority as DAS, EM-1, or S-1. Thresholds are based on the EM HQ Baseline Change Control Charter and the thresholds negotiated between the Field and appropriate DAS and approved by EM-1.
9.	Enter the DOE Field Office and Prime Contractor points of contact and phone numbers.
10.	Enter the DOE HQ Office points of contact and phone numbers.
11.	Briefly describe key elements of the proposed baseline change (e.g., Transfer of sub-project xx to PBS yy; delay of 6 months in the completion of baseline milestone x; or substantial cost increase due to new sub-project; etc.)
12.	Enter the name, position, and site location of the originator of the BCP.

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13.	<p>Site Lead dates and signs in this block.</p> <ul style="list-style-type: none"> <li>• Place the Site Team reviewers names in the appropriate place.</li> <li>• Have each reviewer initial the form upon completing the BCP review.</li> <li>• Date, sign, and write recommendation in the lower portion of the block.</li> </ul>
14.	<p>Lead Site DAS marks the appropriate disposition action.</p> <ul style="list-style-type: none"> <li>• If the disposition action marked for a BCP is recommended, not recommended, or conditionally recommended, then the BCP will need to go to a higher authority consistent with Block 8 (BCP Approval Authority EM-1 or S-1).</li> <li>• If the disposition action marked is approved, disapproved, or conditionally approved, then the action is considered a final disposition consistent with Block 8 (BCP Approval Authority --- DAS).</li> </ul>
15.	<p>EM-1 Assistant Secretary or Chairperson marks the appropriate disposition action for the EM Change Control Board.</p> <ul style="list-style-type: none"> <li>• If the disposition action marked for a BCP is recommended, not recommended, or conditionally recommended then the BCP will need to go to a higher authority consistent with Block 8 (BCP Approval Authority --- S-1).</li> <li>• If the disposition action marked is approved, disapproved, or conditionally approved, then the action is considered a final disposition consistent with Block 8 (BCP Approval Authority --- EM-1).</li> </ul>
	<p><b><i>(1) Crosswalk Requirements</i></b>  <b><i>Whenever PBS structure changes are requested, crosswalk information is required for lifecycle costs, budget authority, and performance data. The crosswalk must be comprehensive in nature, prepared at the lowest level of detail, and encompass all years beginning in FY 1997. Since crosswalk requirements can vary depending on the type of PBS structure change, specific guidance should be obtained by contacting Joanne Lowry on 202-586-4015 regarding lifecycle costs and performance measures, and Janice Fowler on 301-903-8130 regarding budget authority.</i></b></p>